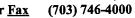
## 」() - 7 フー c れ d PART B - FEE(S) TRANSMITTAL

iComplete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450



or Fax

27572 7590 HARNESS, DICKEY & I P.O. BOX 828 BLOOMFIELD HILLS, MI 0/28/2004 NNGUYEN2 00000125 0	48303	OIPE	Fee(s) Transmitt papers. Each add have its own cer  I hereby certify States Postal Set addressed to the	JBLICATION FEE (if required). Blocks 1 through 5 should be completed where cation of maintenance fees will be mailed to the current correspondence address as new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for  Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.  Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.		
	.2340 10000000 (.	Ž		(Depositor's name)		
1 FC:1501		The manage			(Signature)	
3 FC:8001 30.00 DA		RADPAN	****		(Date)	
APPLICATION NO. FILI	NG DATE	FIRST NA	MED INVENTOR	ATTORNEY DOCKET NO	. CONFIRMATION NO.	
10/630,030 07/	/30/2003	Michae	el L. O'Banion	0275L-000634	7772	
APPLN. TYPE SMAL	L ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	<b>\$137</b> 0	\$300	<b>፯አፙ</b> \$1670	10/26/2004	
EXAMINER		ART UNIT	CLASS-SUBCLASS	\$1070		
WATTS, DOUGLAS D		3724	030-371000			
Change of correspondence address or indication of "Fee Address" (37 CFR i.363).      Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.      □ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			r printing on the patent front page, list le names of up to 3 registered patent attorneys ents OR, alternatively, le name of a single firm (having as a member a lered attorney or agent) and the names of up to listered patent attorneys or agents. If no name is , no name will be printed.    Harness, Dickey & Pie			
	CE DATA TO BE PRIN	TED ON THE PAT	ENT (print or type)			
ASSIGNEE NAME AND RESIDEN		assignee data will	appear on the patent. If an	assignee is identified below, the	e document has been filed for	
<u> </u>	e is identified below, no 11. Completion of this for	orm is NOT a substit	tute for filing an assignment.			
ASSIGNEE NAME AND RESIDEN PLEASE NOTE: Unless an assigne	e is identified below, no 11. Completion of this fo	orm is NOT a substit	ENCE: (CITY and STATE O	R COUNTRY)		
ASSIGNEE NAME AND RESIDEN PLEASE NOTE: Unless an assigne recordation as set forth in 37 CFR 3.	11. Completion of this fo	orm is NOT a substit (B) RESIDI	-	R COUNTRY)		
ASSIGNEE NAME AND RESIDEN PLEASE NOTE: Unless an assigne recordation as set forth in 37 CFR 3.  (A) NAME OF ASSIGNEE  Black & Decker In tase check the appropriate assignee car	11. Completion of this fo	orm is NOT a substit (B) RESIDI Ne Il not be printed on t	ENCE: (CITY and STATE O ewark, Delaware he patent); ☐ individual		group entity	
ASSIGNEE NAME AND RESIDEN PLEASE NOTE: Unless an assigne recordation as set forth in 37 CFR 3.  (A) NAME OF ASSIGNEE  Black & Decker Ir asse check the appropriate assignee ca The following fee(s) are enclosed:	11. Completion of this fo	orm is NOT a substit (B) RESIDI Ne Il not be printed on the	ewark, Delaware the patent); individual to Fee(s):	☑ corporation or other private	group entity	
ASSIGNEE NAME AND RESIDEN PLEASE NOTE: Unless an assigne recordation as set forth in 37 CFR 3.  (A) NAME OF ASSIGNEE  Black & Decker In tase check the appropriate assignee ca The following fee(s) are enclosed:  [4] Issue Fee \$1370	11. Completion of this for	(B) RESIDI  (B) RESIDI  Ne  Il not be printed on the desired of the paymen of the desired of the	ewark, Delaware he patent); individual tt of Fee(s): ck in the amount of the fee(s)	☑ corporation or other private is enclosed.	group entity	
ASSIGNEE NAME AND RESIDEN PLEASE NOTE: Unless an assigne recordation as set forth in 37 CFR 3.  (A) NAME OF ASSIGNEE  Black & Decker Ir ease check the appropriate assignee ca . The following fee(s) are enclosed:	ategory or categories (wil	(B) RESIDI  (B) RESIDI  Note  Il not be printed on the second of the printed on t	ewark, Delaware he patent); individual t of Fee(s): ck in the amount of the fee(s) ent by credit card. Form PTO	ois enclosed.  2038 is attached.  by charge the required fee(s).		

interest as shown by the records of the United States Patent and Trademark Office.

(Authorized Signature) Christopher-M

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.